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	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSIC.!	Form C-104	
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65	
	FILE		AND	Firective 1-1-92	
	u.s.g.s.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (GAS .	
	LAND OFFICE				
	OIL	1			
	TRANSPORTER GAS	1			
	OPERATOR	1			
_	PRORATION OFFICE	1			
I.	Operator				
			,		
	Chambers & Kennedy				
	Address		70701	•	
	607 Midland National	Bank Bldg., Midland, Tex	as 79701		
	Reason(s) for filing (Check proper box	Ţ	Other (Please explain)		
	New Well	Change in Transporter of:			
	Recompletion	Oil X * Dry Ga	s 🗔		
	Change in Ownership	Casinghead Gas Conden	sgte 🗍 l		
	Change in Ownership				
	If change of ownership give name				
	and address of previous owner				
				•	
II.	DESCRIPTION OF WELL AND	LEASE			
	Lease Name	Well No. Pool Nar	ne, Including Formation	Kind of Lease	
	Arco State	1 Chav	veroo	State, Federal or Fee State	
	Location				
	J 2310	Feet From The South Lin	1980'	_{The} East	
	Unit Letter; 2510	Feet From The Bodell Lin	e and 1980 Feet From	The Babe	
	,	0.0	22 E Cha		
	Line of Section 4 , To	wnship 8-S Range	33-Е , ммрм, Cha	Ves County	
	·				
III.	DESIGNATION OF TRANSPOR'	TER OF OIL AND NATURAL GA	S		
	Name of Authorized Transporter of Oil	XX or Condensate	Address (Give address to which appro		
	Mobil Pipeline Co. (A	ttn: Mr. D. C. Kennedy)	P.O. Box 900, Dallas,	Texas 75221	
	Name of Authorized Transporter of Car	singhead Gas or Dry Gas	Address (Give address to which appro		
	None		None		
	None	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en .	
	If well produces oil or liquids,		No	e	
	give location of tanks.	J 4 8-S 33-E	NO		
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number: N	ot Applicable	
_	COMPLETION DATA	•••••••••••••••••••••••••••••••••••••••			
		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completic	on - (X)	X	i i	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	-		4420'	4410'	
	10/25/68	11/4/68 Name of Producing Formation	Top Ott/Gas Pay	Tubing Depth	
	Pool	1 N	1 . / .	· ·	
	Chaveroo	Chaveroo	/4222'	4390'	
	Perforations	```		Depth Casing Shoe	
	4230 - 4402 '			442	
		TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12-1/4"	8-5/8"	374'	250 sx	
			4420'	374 sx	
	7-7/8" to 4200'	4-1/4"	4420	374 SX	
	6-3/4" from 4200'				
	to 4420'	2-3/8" eue tubing	4390'	<u> </u>	
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-	
	OIL WELL	able for this de	pth or be for full 24 hours)		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)	
	12/4/68	12/6/68	Pumping		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	24 hr.	_		· _	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
			05 111	99	
	107 bbls.	107 bbls.	95 bbls.	1 99	
	·				
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
			011 001105	ATION COMMISSION	
VI.	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION COMMISSION		
			12		
			APPROVED	, 19	
			1 - You MI	Barris	
	above is true and complete to the	e best of my knowledge and belief.	BY	WW	
	_		# +1+1/=/	Mr.	
	// 1		TITLE		
			Il was to be filed in	compliance with RULE-1104.	
	6/0				
	of Co Tomas	M	If this is a request for allow	wable for a newly drilled or deepened	
	I Tompse	Mature)	If this is a request for allow	wable for a newly drilled or deepened	
	Manager of Productio	•	If this is a request for allow well, this form must be accompatests taken on the well in acco	wable for a newly drilled or deepened	

(Title)

(Date)

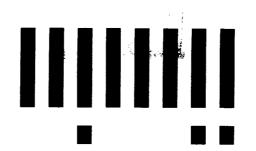
*CHANGE IN TRANSPORTER OF OIL EFFECTIVE

February 26, 1969

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.







Job separation sheet

NO. OF COPIES RECEIVED				
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
TRANSI ORI ER	GAS			
OPERATOR				
PRORATION OFFICE				

IEW MEXICO OIL CONSERVATION COMMISS REQUEST FOR ALLOWABLE AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

	LAND OFFICE	AUTHORI	IZATION TO TRA			GAS	
	TRANSPORTER GAS				*		
I.	PRORATION OFFICE			<u> </u>			· .
	Chambers & Kennedy						
	Address 607 Midland National B		Midland, Tex		01 (Please explain)	-	
	Reason(s) for filing (Check proper box) New Well		ransporter of:	Officer	(Flease explain)		[
	Recompletion	Oil	Dry Ga	=			
,	Change in Ownership	Casinghead	Gas X Conden	isate	·		
	If change of ownership give name and address of previous owner	Not A	Applicable				
II.	DESCRIPTION OF WELL AND I	LEASE	Well No. Pool Na	me, Including For	mation	Kind of Lease	
	Arco State		1 Ch	averoo		State, Federal or Fee St	tate
	Location Unit Letter	Of Feet From	The South Lin	e and1980	Feet From	The East	
	Line of Section 4 , Tow	vnship 8-S	Range	33-E	, NMPM, Ch	aves	County
III.	DESIGNATION OF TRANSPORT	TER OF OIL A	ND NATURAL GA	S			
	Name of Authorized Transporter of Cil	or Cond	iensate	Address (Give.		oved copy of this form is to be s Texas 79701	sent)
	Admiral Crude Oil Comp		or Dry Gas	P.O. Box 1713, Midland, Texas 79701 Address (Give address to which approved copy of this form is to be sent)			sent)
	NONE	,		NONE	w w		
	If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge. 8-S 33-E	Is gas actually NO	i	hen	
	If this production is commingled wit COMPLETION DATA		other lease or pool,		ng order number:	Not Applicable	Diff. Res'v.
	Designate Type of Completio	on = (X)	ζ	X			
	Date Spudded	Date Compl. Rea		Total Depth	. •	P.B.T.D.	
	10/25/68	11/4/68 Name of Products		Top Oil/Gas P		4410 Tubing Depth	
	Chaveroo	Chaveroo		42221		43901	
	Perforations					Depth Casing Shoe	
	4230 - 4402	TU	BING, CASING, AM	CEMENTING	RECORD	1 4420	
	HOLE SIZE	CASING &	TUBING SIZE	, DE	PTH SET	SACKS CEMENT	·
	12-1/4"	8-5/ 4-1/		4420	4 '	250 sx 375 sx	
	7-7/8" to 4200' 6-3/4" from 4200'	4-1/	12	4420		3/3 8.	
	to 4420'	2-3/8" eu		4390			
V.	TEST DATA AND REQUEST FOOL WELL		LE (Test must be a able for this de	epth or be for full	otal volume of load oi 24 hours) ood (Flow, pump, gas	l and must be equal to or exceed	d top allow-
	Date First New Oil Run To Tanks	12/6/68		Producing Metr			
	12/4/68 Length of Test	Tubing Pressure		Casing Pressu		Choke Size	
	24 hr	-		Water-Bbls.		Gas-MCF .	
	Actual Prod. During Test 107 bb1s	107 bb1	ls	Water - Bbis.	95 bb1s_	99	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	•	Bbls. Condens	ate/MMCF	Gravity of Condensate	•
	Testing Method (pitot, back pr.)	Tubing Pressure		Casing Pressu	re	Choke Size	
V1.	CERTIFICATE OF COMPLIANO	CE			OIL CONSERV	ATION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			APPROVED , 19, 19			
	above is true and complete to the	the best of my knowledge and beiter.		TITLE			
	61-			This form is to be filed in compliance with RULE 1104.			
	go Tompson	ature)		If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation			
	Manager of Production	·			tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-		
	(Ti	itle)		able on nev	v and recompleted v	wells.	
	February 21, 1969	February 21, 1969			Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.		

Separate Forms C-104 must be filed for each pool in multiply completed wells.

(Date)

CORRECTION ITEM III